

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

*In re Application of* )  
SCHNECK ET AL. ) Confirmation No. 9271  
Serial No.: 09/642,660 ) Group Art Unit: 1642  
Filed: August 22, 2000 ) Examiner: S. Aeder  
 ) Atty Dkt No: 001107.00042

For: **CELL COMPOSITIONS COMPRISING MOLECULAR  
COMPLEXES THAT MODIFY IMMUNE RESPONSES**

**COMMUNICATION**

U.S. Patent and Trademark Office  
Randolph Building  
401 Dulany Street  
Alexandria, VA 22314

Sir:

The continuity data in the subject application is incorrect as identified on the attached Bibliographic Data Sheet. Applicants submit the accompanying Supplemental ADS which corrects the serial number from 09/074,276 to the correct serial number of 09/063,276. Charge our Deposit Account No. 19-0733 if a fee is due.

Respectfully submitted,

**BANNER & WITCOFF, LTD.**

/Lisa M. Hemmendinger/

Dated: June 9, 2011

By: \_\_\_\_\_

Lisa M. Hemmendinger  
Registration No. 42,653

Banner & Witcoff, Ltd.  
1100 13<sup>th</sup> Street, N.W., Suite 1200  
Washington, D.C. 20005-4051



## UNITED STATES PATENT AND TRADEMARK OFFICE

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Bib Data Sheet

CONFIRMATION NO. 9271

SERIAL NUMBER 09/642,660	FILING OR 371(c) DATE 08/22/2000 RULE	CLASS 530	GROUP ART UNIT 1642	ATTORNEY DOCKET NO. 01107.00042
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## APPLICANTS

Jonathan Schneck, Silver Spring, MD;  
Sean O'Herrin, Baltimore, MD;  
Micheal S. Lebowitz, Pikesville, MD;  
Abdel Hamad, Ellicott City, MD;

\*\* CONTINUING DATA \*\*\*\*\*<sup>063</sup>

This application is a CON of 09/074,276 05/07/1998 PAT 6,082,792 which is a CIP of 08/828,712  
03/28/1997 PAT 6,015,884  
which claims benefit of 60/014,367 03/28/1996

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
\*\* 10/30/2000

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY MD	SHEETS DRAWING 21	TOTAL CLAIMS 50	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

## ADDRESS

22907

## TITLE

CELL COMPOSITIONS COMPRISING MOLECULAR COMPLEXES THAT MODIFY IMMUNE RESPONSES

FILING FEE RECEIVED 1460	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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